

*Charles A. Burd  
Paralegal Specialist*

**MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET  
(FOR USE WITH FORM 75)**

SERIAL NO. **097890214**

FILING DATE

**CLAIMS**

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1					
2		1				
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<b>TOTAL IND.</b>			4			
<b>TOTAL DEP.</b>			5			
<b>TOTAL CLAIMS</b>			9			

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	IND.	DEP.	IND.	DEP.	IND.	DEP.
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<b>TOTAL DEP.</b>						
<b>TOTAL CLAIMS</b>						